Health education interventions for cardiovascular risk reduction in women age 40-64

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West Virginia WISEWOMAN is one of the six CDC funded WISEWOMAN research studies designed to reduce cardiovascular risk for low-income uninsured and underinsured women aged 40-64 through implementation of health education interventions

9 additional states have WISEWOMAN as service projects

WISEWOMAN programs are offered through the Breast and Cervical Cancer Screening programs in each of these states

West Virginia WISEWOMAN was funded from 2003-2008 to develop and test behavioral interventions designed for women in rural Appalachia

WISEWOMAN

Goal: Evaluate the effectiveness of the West Virginia WISEWOMAN intervention strategies to reduce cardiovascular risk

- Decrease dietary fat intake
- Increase vegetable & fruit intake
- Increase physical activity
- Increase HDL cholesterol (secondary)
- Decrease B/P in hypertensive women (secondary)

Experimental two group research design

Thirteen clinical sites in the northern and southern counties of West Virginia are participating



Baseline and 12 month follow-up of all participants

Health risk and behavioral survey

Diet, physical activity, smoking assessment

Psychosocial mediators of change (knowledge, attitudes, social support systems, readiness to change)

Clinical assessment

HDL and total cholesterol
Glucose
BMI
Waist circumference

Waist circumference Blood pressure



Socio-demographic data (N = 733)

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40-49 37.4 50-65 62.6

Married/partner 64.8

Education

< 9th grade 6.0 Some high school 13.0 High school/GED 49.9 Some college 31.1

Ethnicity

White 93.7 African American 4.4 Other 1.8



Data from 733 study participants show high risk for cardiovascular and other chronic disease

24% 60%
30%
25% 23%
29% 56% 25%



There are four intervention components for West Virginia WISEWOMAN

Cookin' Up Health, a culturally targeted computer-based interactive nutrition program

Tailored print-based health communications to reinforce change in nutrition and physical activity behavior

Self-help smoking booklet for smokers who are thinking or planning to quit

Pedometers given to participants at the initial visit along with booklet to keep track of steps



Health education interventions are informed by behavioral theory

Cookin' Up Health focuses on:

- ➤ enhancing behavioral capability to increase knowledge and skills to facilitate positive changes, and self-efficacy to increase one's confidence to make dietary behavioral change (Social Cognitive theory)
- ➤ the benefits, barriers and cues to action to initiate change, stressing the benefits of, and overcoming barriers to change (Health Belief Model)

The Transtheoretical Model forms the basis of the Tailored Health Communications, with content informed by the Health Belief Model



Using a cooking show theme, Cookin' Up Health

- discusses the benefits of healthy eating (fruits and vegetables, lower fat foods)
- provides information on dietary fats, serving sizes of various foods, and nutrition labeling
- demonstrates step-by-step meal preparation emphasizing healthy selection and portion control.

Woven in with the recipes are information and tips on nutrition.

The program encourages users to try lower fat cooking methods and increase fruits and vegetables in recipes



Prior to developing *Cookin' Up Health* formative research in the form of focus groups with women in two rural counties in West Virginia were conducted to guide the development of the intervention. Findings showed:

- > weight loss was more of a motivator for dietary change than was preventing heart disease
- social support both a barrier and facilitator for dietary change
- cultural heritage and the way women were raised were major barriers to making health changes as adults
- convenience and the cost of eating healthier were major factors when trying to make dietary changes
- women did not feel confident in their ability to maintain dietary changes

These themes were used to inform the content and design of the intervention

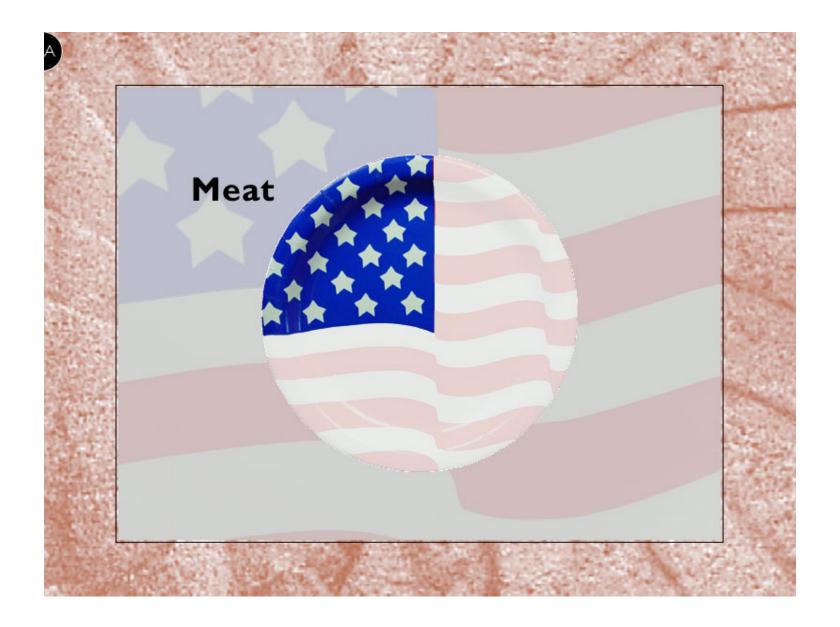




















Cookin' Up Health

An update to the program in 2005 added messages:

- Energy balance
- Increasing physical activity (walking)
- Build A Meal chose foods for a meal showing calories, total fat, saturated fat, sodium and fiber content
- Portion size quiz
- Nutrition label reading quiz
- Metabolic syndrome
- Glycemic index

Now web based: www.cookinuphealth.com

(can try out by going to: www.peopledesigns.com)



Print-based tailored health communications

- reinforce nutrition messages of Cookin' Up Health
- encourage change in physical activity (pedometer use)

Tailored print health communications sent to women at home Physical activity – 2, 4, and 8 months

Nutrition – 3, 5, and 9 months

Each health communication:

- 4 page (folded 11x17)
- theme
- quotes from women
- testimonials about changing

West Virginia scenery and people Reading level – 6th grade Slight differences if single or family



Stage of readiness to change

Precontemplation

Not engaging in behavior

Not thinking of changing

Message theme: increase awareness of need, benefits of change

Contemplation/Preparation

Not engaging in behavior

Thinking or planning to change

Message theme: reduce barriers to change, action plans

Action

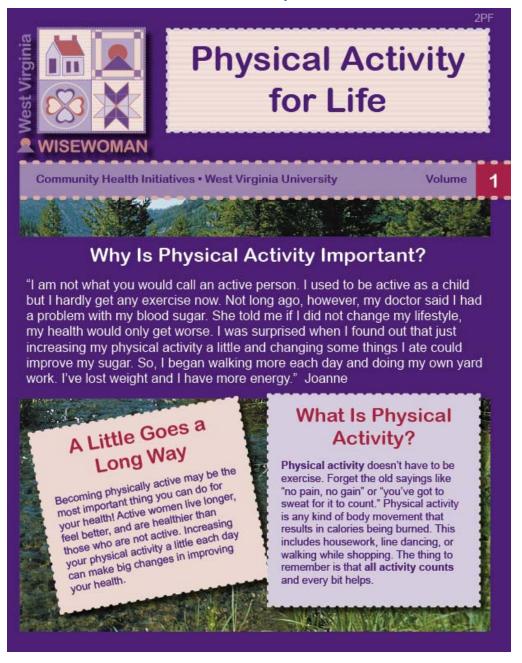
Engaging in behavior

Message theme: Encouragement, support to

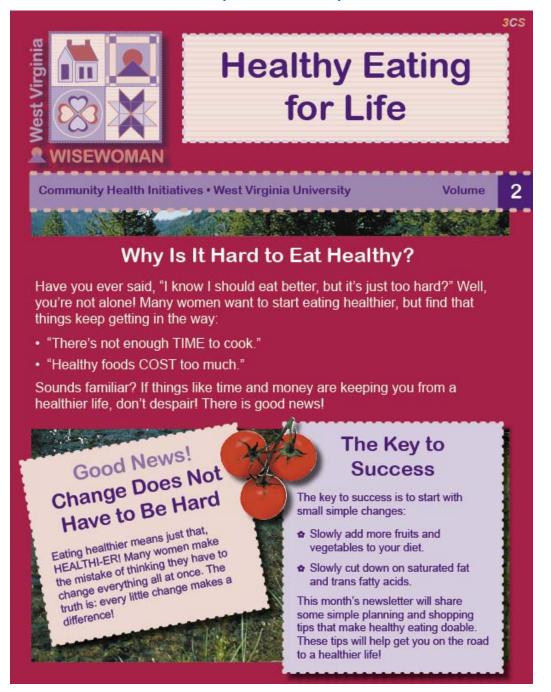
reinforce change, relapse prevention



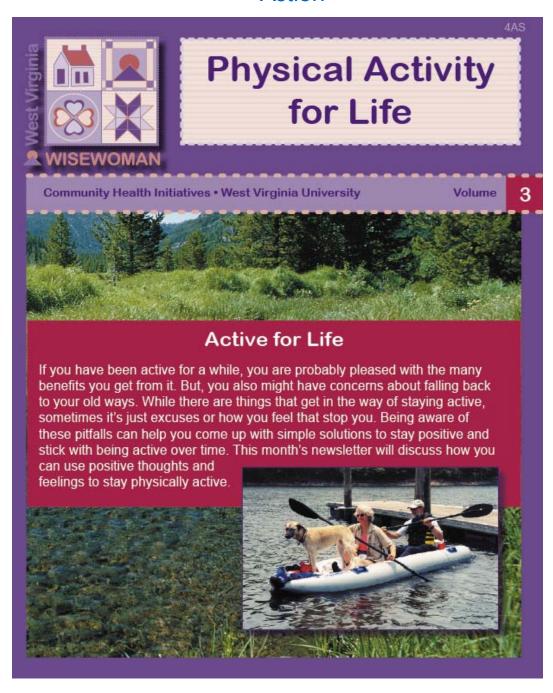
Precontemplation



Contemplation/Preparation



Action



Turning Excuses Into Good Feelings

Many women feel tired or sleepy at the end of a busy day. Many also feel stressed out by the demands of work and personal things. It can be hard to find the willpower to be active when you feel tired or stressed out. These feelings can get in the way of staying active. It's easy to use them as excuses to not exercise.

Let's look at these emotions and how they can be turned into good feelings with physical activity:

Tired, Sleepy

Drowsy

Energized

Angry, Irritated

Depressed

Positive, Upbeat

Sad, Negative

Worried, Anxious

Awake, Alert

Energized

Calm, Patient

Positive, Upbeat

Sheef-confident

If you're feeling down or tired, physical activity is one of the best ways to feel better in MINUTES!

Take a Break and Walk

"I used to exercise to stay in shape but it was never fun because I worked out too hard. When my life got stressful and busy, I stopped exercising because I was too tired and couldn't fit physical activity into my schedule. Then I felt guilty and frustrated with myself. I finally figured out that if I just aimed for light exercise, I could stay active without totally stopping my routine. Just taking a few breaks to walk during the day helped me keep moving and feeling better too."

Slipped Up? Don't Give Up!

It is normal to feel guilty or angry if something keeps you from reaching your activity goals. You might be tempted to give up and feel like you "failed" or "lost" your battle with self-discipline. Being physically active, however, is not about winning or losing. It's normal to slip up now and then. To get back on track, use the positive thoughts and feelings you get from exercise to motivate you to begin again. Remember, walking can be a great way to stay active when the going gets tough.

"Change does make a difference.



Stressed, Tense



Stress Resistant, Relaxed

Wisdom From the Hills

"I've found life is a lot like walking in West Virginia. It's hard to find flat ground. You are either going up or down a hill. Life is full of ups and downs too—some days are easy and pleasant and others are tough. The joy I get from walking is the motivation that keeps me going when my life gets crazy." Patty

Well-Being for You and Others

When you feel good about yourself, it can make others feel the same way. You not only handle your own stress better when you are physically active, you can help others deal with theirs, too. Let your family and others know how much a little physical activity improves your mood and encourage them to join you. Turn "misery loves company," into "positive energy loves company."



Summary

West Virginia is one of the most socio-economically disadvantaged rural regions in the U.S. and high rates of poverty, unemployment, low education, and limited access to health service

lead to increased risk for cardiovascular and other chronic disease

Nationally West Virginia has the highest rate of heart disease and diabetes and ranks 2nd in the prevalence of obesity, hypertension, and tobacco use

Baseline data from the health risk survey and clinical assessment of 733 participants show high rates of overweight and obesity, **Nest Virginia** high blood pressure, diabetes and cholesterol

Culturally targeted and individually tailored health education communications were designed to help reduce this risk

WISEWOMAN